Continuum of Care: Fiscal Workgroup Meeting Minutes November 21, 2013 from 10:00 a.m. to 2:00 p.m.

CDSS OB8 - Conference Rooms 235/237

Conference Call: 1(888) 363-4735 · Access Code: 822465 · Meeting ID: 432-381-730

Webinar: https://www2.gotomeeting.com/join/432381730

Meeting Title	Date	Time	Location
CCR Fiscal Workgroup	11/21/2013	10:00 a.m. to 2:00 p.m.	OB8 - Rooms 235/237

PURPOSE OF MEETING

• To address and confirm key questions related to the rate structure of residential care programs.

ROLES AND RESPONSIBILITIES

Role	Name
Co-Chair & Facilitator	Debra Williams – <u>Debra.Williams@dss.ca.gov</u>
Co-Chair & Facilitator	Doug Johnson – <u>Djohnson@cacfs.org</u>
Logistics Coordinator and Scribe	Adrian McIntosh – Adrian.McIntosh@dss.ca.gov

ATTENDEES

Aaron Goff Adrian McIntosh Haysim Afiff Barbara Wiener Barry Fox Bob Stovall	Dan Gallagher Dan Maydeck Deanne Pearn Debra Williams Diana Boyer Doug Johnson	Liz Crudo Marie Ary Mary Sheppard Mike Weissenburger Molly Dunn Monica Bentley	Richard Hildebrand Ryan Herren Sheliah Dupuy Shelton Dent Shirell Naidu Thomas Yee
Caroline Caton Casey Blake Cheryl Treadwell Chris Burns	Fanita Polk-Reaves Gail Gronert Gail Johnson-Vaughan Geri Wilson Jim Roberts	Nancy Littlefield Paul Vossen Raquel Flanagan Ray Thomas Rich Ryan	Vince Richardson Yiping Hu

Continuum of Care: Fiscal Workgroup Meeting Minutes

AGENDA

	Agenda Item	Presenter	Time
1	Welcome and Introductions	Debra Williams	10:00 a.m10:10 a.m.
2	Discussion of Residential Care Models for CCR: What are the pros and cons of having one group home rate classification with additional funds from EPSDT, and other county funds to pay for an array of services? • If different levels of services are preferred, how could provider programs be organized to provide multiple levels of service within the same program?	Debra Williams Doug Johnson Bob Stovall Brendon Barnett Aaron Goff	10:10 a.m11:30 a.m.
3	Lunch		11:30 a.m12:30 p.m.
4	Discussion of possible rate structure for community based services: Funding sources include Title IV-E EPSDT County match County funded programs	Debra Williams	12:30 p.m1:45 p.m.
5	 Next Steps Define parental activities for Title IV-E purposes. Request reference material from DHCS around services and supports activities that are not "parental-like" in nature. Look at Title IV-E administration for contracted services or activities. 	Debra Williams	1:45 p.m 2:00 p.m.

Continuum of Care: Fiscal Workgroup Meeting Minutes

MEETING MINUTES FROM 11/21/2013

Presentation by DSS staff of a statewide "Base Rate" model

• Brief overview draft document titled "Residential Care Fiscal Model."

Funding the Living Situation and Levels of Supervision

- Overview of how a board and care rate could be standardized across all California group homes.
- Discussion of difficulties with having different levels of supervision and tying assessment to levels of supervision.
- Question about whether different "sub-populations" have a need for different intensities in supervision.
- There is a need to identify all residential care activities that qualify as "parental activities" and those that are supported under EPSDT or specialty mental health.
- Discussion of utilizing IV-E admin funding for certain activities.

Funding Treatments and Therapies

- Comment identifying that just because a child has been deemed eligible for EPSDT funding does not necessarily mean that the provider is being guaranteed funds for delivering entitled services.
- Having county-specific criteria causes problems for out-of-county placements.
- DHCS differentiates between the terms "mental health" and "behavioral health" when it comes to actual diagnoses and treatment.
- DHCS indicated that it might be possible to attach a rate to specific living situations (i.e., placement options) for treatment.

Funding Services and Supports

• Is there an opportunity to utilize IV-E funds for services and supports for case management?

Identifying Assumptions and Premises of Fiscal Model

- Assessment has determined that child needs residential care for supervision reasons.
- Residential care fiscal model is for California programs only.
- Majority of children in residential care will be eligible for specialty mental health needs.
- All residential care providers have a contract with county mental health to provide mental health services.

Other General Comments

- Rate methodology documents/proposals should include assumptions and premises guiding the methodology.
- Request for clarification on "supervision" for the purpose of cost sharing. For example, could time spent with a psychiatrist potentially be considered supervision since no other party is supervising the child?
- There's a need to create career paths within foster care to reduce overturn and improve retention.

Parking Lot Questions

- Will there be technical assistance to providers to get mental health contracts?
- Can one provider deliver services to youth from other programs?
- Is there a need for an out-of-state payment model?

Please send comments and recommendations to the CCR unit: CCR@dss.ca.gov